

DEPARTMENT OF HEALTH SERVICES

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October 7, 1994

TO: All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons

Letter No.: 94-79

UPDATE—"OTHER HEALTH COVERAGE (OHC)" TRAINING

In December 1993, the Department of Health Services began a new training program on identification of health insurance coverage held by Medi-Cal eligible clients. This training was developed with the eligibility worker in mind and a commitment to help counties improve the identification of health insurance coverage. The ultimate goal is to extend Medi-Cal program funds by redirecting the cost of care to available insurance coverage. Increased insurance identification, however, also results in higher incentive payments to the counties through the County Bounty program.

The training focuses on the importance of insurance identification. It covers state-administered programs, such as the Health Insurance Premium Payment Program (HIPP), Employer Group Health Plan (EGHP), County Bounty, and the post-payment recovery process. The training includes proper completion of the Health Insurance Questionnaire (DHS 6155), and a discussion of the types of questions to ask clients to obtain information about their insurance coverage. There is ample time for the participants to ask questions and discuss issues unique to their caseload.

Since December, 15 counties have received this training. Approximately 3,000 Aid to Families with Dependent Children, Medi-Cal and adoption workers, line supervisors, trainers, and managers have attended to date. Training evaluations have been very positive about its relevance and usefulness to the counties. As we recognize the value to the Medi-Cal program in obtaining this information, we also recognize the importance of the people who gather the information. Bringing the training directly to the eligibility workers aids county efforts and helps us gain valuable information for future efforts in this area.

Statewide, county interest in the training has been very high and the scheduling coordination has been very flexible to accommodate the needs of each county. Our commitment includes visiting any county that wishes to offer this training to its employees and to offer assistance with training materials for the county to use in its own training.

In addition to being a training resource to the county, the program has enabled us to have a closer look at some of the problems in identifying OHC. Through the training we are able to share from county to county and to benefit from county expertise. Some of the issues raised include:

Future of the County Bounty Program

The County Bounty program is a pilot incentive program for counties to increase OHC identification by earning \$50 for each new case reported to the Department with other health insurance coverage. An evaluation of the program was done in March to decide whether or not to continue the program past June 30, 1993. The program was initially justified on a projected increase in statewide OHC reporting. Unfortunately, the anticipated increase did not occur. However, because several contracts were not finalized until September 1993 and there was insufficient time for all counties to implement procedural improvements and training, the County Bounty program was extended through December 31, 1994. Another evaluation will be conducted in October to determine the future of the program. Hopefully, an increase in OHC identification rates will justify continuing the program beyond December 1994.

All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons
Page 2

Aid to Adoptive Children Program

The county is required to complete a DHS 6155 for Medi-Cal eligible children in the Aid to Adoptive Children Program when there is health insurance coverage available through the adoptive parents. Several counties indicated this is an area often overlooked and may make a significant impact on the OHC identification rates. At the state level, we are working with the Department of Social Services to improve insurance reporting procedures in the Adoptions program. In the interim, we would encourage counties to review procedures for identifying health insurance available to Medi-Cal eligible adoptive children.

Concerns with Providers

In response to the concerns we have heard from the counties, we are preparing a provider bulletin outlining the correct procedures to follow when serving clients with health insurance coverage. Providers will be reminded of their responsibilities to serve all Medi-Cal clients and that refusing service to a client based solely on the client having other health insurance coverage is in violation of federal law.

Elective Abortions and CHAMPUS

Some providers are requiring recipients with Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) health coverage to obtain a Medi-Cal card with the OHC code "C" removed prior to providing elective abortion services. Elective abortions (Procedure Codes 59840-59852) are not covered benefits under CHAMPUS and Medi-Cal does not cost avoid these procedure codes for OHC code "C". Therefore, providers may bill Medi-Cal directly for these procedures even though the recipient's card or eligibility verification indicates CHAMPUS coverage. Providers are not required to bill CHAMPUS before billing Medi-Cal for these procedures and should not instruct recipients to have the OHC code "C" removed from the Medi-Cal card. A provider bulletin and provider manual updates were mailed to providers in May 1994 clarifying this issue.

Signature on DHS 6155, Health Insurance Questionnaire

County staff frequently ask whether it is necessary to have the applicant sign the DHS 6155. County staff should attempt to have the applicant complete and sign the DHS 6155. This reinforces that the client is responsible to use the insurance and report changes. However, we realize that sometimes this is not possible and someone other than the client signs the DHS 6155. We will not return a DHS 6155 because of the signature, or lack thereof. In any situation, the applicant should be given a copy of the completed document and a copy kept in the case file.

Proper Coding and Completion of the DHS 6155 for Kaiser and Other Health Maintenance Organizations

In several counties, staff were not aware that a DHS 6155 should be completed for recipients enrolled in health maintenance organizations (HMO) or prepaid health plans (PHPs). Enrollment in a department sponsored managed care plan should not be reported on a DHS 6155. However, any HMO or PHP enrollment through the beneficiary's employer, pension plan, individual policy, absent parent, or similar payor, must be reported on a DHS 6155. In addition, the appropriate OHC code should be added to the recipient's Medi-Cal Eligibility Data System (MEDS) record. The proper codes to use are: "K" for Kaiser, "C" for CHAMPUS, and "P" for all other prepaid health plans.

All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons
Page 3

"Let's Talk About It" Brochures for County Use

This brochure was produced in limited quantities to test its usefulness. A copy is included in the training material and many county workers have indicated that it may encourage additional reporting. The Department will explore the feasibility of reprinting the brochure in both English and Spanish.

Health Insurance System (HIS) County Access

All County Welfare Letter No. 94-50, dated June 21, 1994, provided instructions for county staff to access HIS which is a MEDS-linked database containing health insurance information for Medi-Cal beneficiaries. As training time allows, we have been offering some hands-on training to supervisors on this new MEDS feature.

Besides providing insurance information to respond to beneficiaries' inquiries and in identifying insurance carriers, the county staff have suggested other uses for this new procedure. Access allows the worker to check if the information has already been submitted to DHS, helps identify the correct OHC code for each carrier, gives some information on prior insurance history reported by another county, and supplies a resource of insurance carrier phone numbers. While not required by Departmental policy, several counties have indicated they will be incorporating this access into their procedures.

In addition to these areas, training staff have been able to clarify more specific issues, answer a variety of questions and encourage future comments and questions by supplying resource information and telephone numbers. We look forward to bringing our training program to each county.

If you have any questions or wish to schedule training, please call Ms. Susan Shafer, Health Insurance Section, Third Party Liability Branch, at (916) 323-1974.

Sincerely,

ORIGINAL SIGNED BY

FRANK S. MARTUCCI, Chief
Medi-Cal Eligibility Branch